21-44289 UNITED STATES OMB APPROVAL FORM D OMB Number: 3235-0076 SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Expires: May 31, 2005 FORM D Estimated average burden RECEIVED hours per response.....1 NOTICE OF SALE OF SECURITIES 2002 SEC USE ONLY PÚRSUANT TO REGULATION D. Prefix Serial **SECTION 4(6), AND/OR** FIFORM LIMITED OFFERING EXEMPTION DATE RECEIVED Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series C and D Preferred Stock Financing and Merger Filing Under (Check box(es) that apply): ☐ Rule 505 Rule 506 Section 4(6) ULOE New Filing Type of Filing: Amendment **BASIC IDENTIFICATION DATA** 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) 02056387 TRADEC, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)

Brief Description of Business Supply Chain Software

from Executive Offices)

84 W. Santa Clara Street, Suite 500

| Type of Business Organization | | |
|-------------------------------|-------------------------------------|-------------------------|
| Corporation | limited partnership, already formed | |
| business trust | limited partnership, to be formed | other (please specify): |

Actual or Estimated Date of Incorporation or Organization:

Month Year 0 5 9 5

Actual Estimated

408-291-2565

Telephone Number (Including Area Code)

THOMSOM FINANCIA

Jurisdiction of Incorporation or Organization:

(Enter two-letter U.S. Postal Service Abbreviation for State: CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

San Jose, CA 95113 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



| A. BASIC IDENTIFICATION DATA | |
|---|----------------------|
| Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. | of the issuer; |
| Check Box(es) that Apply: 🔲 Promoter 🛛 Beneficial Owner 🖾 Executive Officer 🖾 Director 🔲 General Managi | and/or ng Partner |
| Full Name (Last name first, if individual) | |
| Abe, John R. | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| 84 W. Santa Clara Street, Suite 500 San Jose, CA 95113 | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General Managi | and/or ng Partner |
| Full Name (Last name first, if individual) Winder, Edwin C. | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| 84 W. Santa Clara Street, Suite 500 San Jose, CA 95113 | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General | and/or ng Partner |
| Full Name (Last name first, if individual) | |
| Graystone Venture Direct Equity, LP | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| One Northfield Plaza, Suite 530 Northfield, IL 60093 | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managi | and/or ng Partner |
| Full Name (Last name first, if individual) Novus Ventures, L.P. | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| 2011 Stevens Creek Blvd, Suite 130 Cupertino, CA 95014 | |
| Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer Director General | and/or ng Partner |
| Full Name (Last name first, if individual) | |
| Massey, Henry P., Jr | |
| Business or Residence Address (Number and Street, City, State, Zip Code) 650 Page Mill Road, Palo Alto, CA 94304 | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General | and/or ng Partner |
| Full Name (Last name first, if individual) | <u> </u> |
| Tompkins, Dan | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| 84 W. Santa Clara Street, Suite 500 San Jose, CA 95113 | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General Managi | and/or ng Partner |
| Full Name (Last name first, if individual) | |
| Chandler, Edward | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| 84 W. Santa Clara Street, Suite 500 San Jose, CA 95113 | |
| (Use blank sheet, or copy and use additional copies of this sheet, as necessary) | |

| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | X Director | General and/or Managing Partner |
|-----------------------------|------------------------|---------------------------|--|------------|---------------------------------|
| Full Name (Last name first, | if individual) | | | | |
| Ross, Ken | | | This was a second of the secon | | |
| Business or Residence Addre | ess (Number and Street | t, City, State, Zip Code) | | | |
| 84 W. Santa Clara Street, S | Suite 500 San Jose, | CA 95113 | | • | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | ☐ Executive Officer | X Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Haque, Promod | | | | | |
| Business or Residence Addre | ess (Number and Stree | t, City, State, Zip Code) | | | |
| 84 W. Santa Clara Street, S | Suite 500 San Jose, | CA 95113 | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | X Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Siegelman, Russell | | | | | |
| Business or Residence Addre | ess (Number and Stree | t, City, State, Zip Code) | | | |
| 84 W. Santa Clara Street, S | Suite 500 San Jose, | CA 95113 | | | |
| Check Box(es) that Apply: | Promoter | X Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| KPCB Holdings, Inc. as no | minee | | | | |
| Business or Residence Addr | ess (Number and Stree | t, City, State, Zip Code) | | | |
| 2750 Sand Hill Road, Men | lo Park, CA 94025 | | | | |
| Check Box(es) that Apply: | Promoter | X Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Norwest Venture Partners | VII, LP | | | | |
| Business or Residence Addr | ess (Number and Stree | t, City, State, Zip Code) | | | |
| 245 Lytton Avenue, Suite 2 | 50, Palo Alto, CA 943 | 301 | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | X Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Augustine, Troy | | | | | |
| Business or Residence Addr | ess (Number and Stree | t, City, State, Zip Code) | | | |
| 84 W. Santa Clara Street, | Suite 500 San Jose, | CA 95113 | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | X Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Vanlare, Stephen | | | | | |
| Business or Residence Addr | ess (Number and Stree | t, City, State, Zip Code) | | | , |
| 84 W. Santa Clara Street, | Suite 500 San Jose, | CA 95113 | | | |
| Check Box(es) that Apply: | Promoter | X Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| RRE Ventures II LP | | | ************************************** | | |
| Business or Residence Addr | • | t, City, State, Zip Code) | | | |
| 126 East 56th Street, New Y | ork, NY 10022 | | • | | |

| Check Box(es) that Apply: | Promoter | X Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
|---|---------------------|------------------------------|---------------------------------------|-------------------|--|
| Full Name (Last name first, it | f individual) | | | | |
| Business or Residence Addre 84 W. Santa Clara St., Suite | • | | | | |
| Check Box(es) that Apply: | Promoter | X Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, i | findividual) | | | | |
| Springvest Corporation | | | <u> </u> | | |
| Business or Residence Addre | ss (Number and Stre | et, City, State, Zip Code) | | | |
| 301-1 Min Sheng W. Road, | Taipei 103, Taiwan | R.O.C | | | |
| Check Box(es) that Apply: | Promoter | X Beneficial Owner | ☐ Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, i | f individual) | | | | |
| World Peace Industrial Pea | ce Co. Ltd. | | | | |
| Business or Residence Addre | ss (Number and Stre | et, City, State, Zip Code) | | | |
| 8F 76 Chng Kung Road, Se | c. Nankang, Taipei, | Tawian R.O.C | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, i | f individual) | | | | |
| Business or Residence Addre | ss (Number and Stre | et, City, State, Zip Code) | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, i | f individual) | 7,00 | | | |
| Business or Residence Addre | ss (Number and Stre | et, City, State, Zip Code) | · · · · · · · · · · · · · · · · · · · | | ************************************** |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, i | f individual) | | | | |
| Business or Residence Addre | ss (Number and Stre | et, City, State, Zip Code) | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, i | f individual) | | | | |
| Business or Residence Addre | ss (Number and Stre | et, City, State, Zip Code) | | | · |
| _ | (Use blan | k sheet, or copy and use add | ditional copies of this shee | et, as necessary) | |

| <u></u> | | 14 JF 911 965 L | | В. | INTUR | MATION A | ABOUT OF | FERING | a laking <u> </u> | <u> </u> | | 2.34 |
|--|--|--|---|--|---|------------------------------------|-------------------------------------|----------------------------------|----------------------------------|---|---------------------------------|--|
| . Has the | e issuer sold. | or does the is | ssuer intend t | o sell, to nor | n-accredited | investors in t | his offering? | | | | Yes ⊠ | No |
| 1145 | Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? | | | | | | | - | | | | |
| . What is | the minimu | m investmen | t that will be | accepted fro | m any indivi | dual? | ., | | ••••••• | *************************************** | \$ | N/A |
| Does th | ne offering ne | rmit ioint ov | vnershin of a | single unit? | | | | | | | Yes ⊠ | No |
| | Does the offering permit joint ownership of a single unit? | | | | | | | | | | L | |
| remune person | eration for sol or agent of a ve (5) persons | icitation of p broker or dea | urchasers in c der registered | onnection w I with the SE | vith sales of se C and/or with | ecurities in th h a state or st | ne offering. It ates, list the r | f a person to b name of the b | oe listed is an roker or deal | associated er. If more | | |
| ull Name (I | ast name fire | st, if individu | ial) | | | ···· | | | | | | |
| Business or I | Residence Ac | Idress (Numb | per and Street | t, City, State | , Zip Code) | | | | | | | · · · · · · · · · · · · · · · · · · · |
| ame of Ass | ociated Brok | er or Dealer | | | | | | | | | | |
| tates in Wh | ich Person L | sted Has Sol | icited or Inte | nds to Solici | it Purchasers | | | | | | | |
| (Check "A | All States" or | check indivi | duals States) | | | | | | | | ☐ A1 | 1 States |
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| [MT] | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
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| | C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE | OF PROCEEDS | | |
|----|---|-----------------------------|---------------|-------------------------------------|
| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. | | | |
| | Type of Security | Aggregate Offering Price | Amo | ount Already Sold |
| | Debt | | \$ | 0.00 |
| | Equity | \$ 15,623,499.72 | \$ 1. | 5,477,985.18 |
| | ☐ Common ☐ Preferred | | | |
| | Convertible Securities (including warrants) | \$0.00 | \$ | 0.00 |
| | Partnership Interests | | \$_ | 0.00 |
| | Other (Specify) | | \$_ | 0.00 |
| | Total | \$_15,623,499.72 | \$ _1. | 5,477,985.18 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | | | |
| | | Number Investors | Dol | aggregate lar Amount Purchase |
| | Accredited investors | 59 | \$ <u>15</u> | ,413,257.47 |
| | Non-accredited Investors | 24 | \$ | 64,727.71 |
| | Total (for filings under Rule 504 only) | N/A | \$ | N/A |
| | Answer also in Appendix, Column 4, if filing under ULOE. | | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. | | | |
| | Type of Offering | Type of Security | Dol | lar Amount Sold |
| | Rule 505 | · · | \$ | N/A |
| | Regulation A | N/A | \$ | N/A |
| | Rule 504 | N/A | \$ | N/A |
| | Total | N/A | \$ | N/A |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | | |
| | Transfer Agent's Fees | | \$ | |
| | Printing and Engraving Costs | | \$ | |
| | Legal Fees | \boxtimes | \$ | 230,000.00 |
| | Accounting Fees | | \$ | |
| | Engineering Fees | | \$ | |
| | Sales Commissions (specify finders' fees separately) | | \$ | |
| | Other Expenses (identify) | | \$ | |
| | Total | X | \$ | 230,000.00 |

| | C: OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND | USE OF PR | OCEEDS | gas a said of | |
|---------------------------|--|----------------|----------------------------------|--------------------------|------------------|
| | b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." | i | | \$ <u>15,393</u> | 499.72 |
| 5. | Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer forth in response to Part C - Question 4.b above. | the | | | |
| | | Officers, I | ents to Directors & liates | Payme Oth | |
| | Salaries and fees | ☐ \$ | 0.00_ | s | 0.00 |
| | Purchase of real estate | \$ | 0.00 | □ s | 0.00 |
| | Purchase, rental or leasing and installation of machinery and equipment | S | 0.00 | □ s | 0.00 |
| | Construction or leasing of plant buildings and facilities | □ s | 0.00 | □ s | 0.00 |
| | Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) | S | 0.00 | □ s | 0.00 |
| | Repayment of indebtedness | S | 0.00 | □ s | 0.00 |
| | Working capital | □ s | 0.00 | \$ <u>15,39</u> | 3,499.72 |
| | Other (specify): | □ s | 0.00 | □ s | 0.00 |
| | Column Totals | □ s | 0.00 | ∑ \$ <u>15,39</u> | 3,49 <u>9.72</u> |
| | Total Payments Listed (column totals added) | | ∑ \$ <u>15,393,</u> | 499.72 | |
| | D. FEDERAL SIGNATURE | | | | |
| | issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed u | | | | |
| und | ertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff redited investor pursuant to paragraph (b)(2) of Rule 502. | , the informat | ion furnished l | by the issuer | o any non- |
| und | ertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff redited investor pursuant to paragraph (b)(2) of Rule 502. | , the informat | ion furnished l | by the issuer | o any non- |
| und acci Issi TR | ertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff redited investor pursuant to paragraph (b)(2) of Rule 502. Output Signature Description De | | | by the issuer | o any non- |

Intentional Misstatements or Omissions of Fact Constitute Federal Criminal Violations. (See 18. U.S.C. 1001.)